| United States Bankruptcy Court<br>Eastern District of Washington   | Voluntary Petition   |  |  |  |  |
|--|--|--|--|--|--|
| Name of Debtor (if individual, enter Last, First, Middle):  Clements, Evan, J.  Name of Joint Debtor (Spouse) (Last, First, Middle):   | rst, Middle):  |  |  |  |  |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):  All Other Names used by the Joint Debtor (include married, maiden, and trade names):   |  |  |  |  |  |
| Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN(if more than one, state all):  Last four digits of Soc. Sec. or Individual one, state all):  | al-Taxpayer I.D. (ITIN)/Complete EIN(if more than  |  |  |  |  |
| Street Address of Debtor (No. & Street, City, and State):  6704 N. Monroe  Street Address of Joint Debtor (No. & Street, City, and State):   |  |  |  |  |  |
| Spokane, WA  ZIP CODE 99208  | ZIP CODE   |  |  |  |  |
| County of Residence or of the Principal Place of Business:  Spokane  County of Residence or of the Principal I   | Place of Business:   |  |  |  |  |
| Mailing Address of Debtor (if different from street address):  Mailing Address of Joint Debtor (if different from street address):   | erent from street address):  |  |  |  |  |
| ZIP CODE   | ZIP CODE   |  |  |  |  |
| Location of Principal Assets of Business Debtor (if different from street address above):  | ZID CODE   |  |  |  |  |
| Type of Debtor Nature of Business Chapter  | ZIP CODE  of Bankruptcy Code Under Which   |  |  |  |  |
| (Form of Organization) (Check <b>one</b> box) <b>the</b> P   | Petition is Filed (Check one box)  |  |  |  |  |
| (Check one box.)  ☐ Health Care Business ☐ Single Asset Real Estate as defined in 11 ☐ Corporation (includes LLC and LLP) ☐ Railroad ☐ Chapter 7 ☐ Chapter 7 ☐ Chapter 9 ☐ Railroad ☐ Chapter 11   | Chapter 15 Petition for Recognition of a Foreign Main Proceeding   |  |  |  |  |
| Partnership Stockbroker Chapter 12   | ☐ Chapter 15 Petition for Recognition of a Foreign   |  |  |  |  |
| Other (If debtor is not one of the above entities, check this box and state type of entity below.)  Commodity Broker  Clearing Bank  Chapter 13  | Nonmain Proceeding   |  |  |  |  |
| Other  | Nature of Debts<br>(Check one box)   |  |  |  |  |
|  | ntity  ☐ Debts are primarily consumer ☐ Debts are primarily  |  |  |  |  |
| (Check box, if applicable)  ☐ Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code.)  ☐ Check box, if applicable)  ☐ debts, defined in § 101(8) as "inc individual prima personal, family, bold purpose"                                      | curred by an<br>arily for a  |  |  |  |  |
| noid purpose.  | napter 11 Debtors  |  |  |  |  |
| Check one box:   |  |  |  |  |  |
| l <u> </u>   | <ul> <li>□ Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).</li> <li>□ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).</li> </ul> |  |  |  |  |
| signed application for the court's consideration certifying that the debtor is  Check if:  |  |  |  |  |  |
| unable to pay fee except in installments. Rule 1006(b) See Official Form 3A.  Debtor's aggregate noncontinge insiders or affiliates) are less the  | ent liquidated debts (excluding debts owed to nan \$2,343,300 (amount subject to adjustment on   |  |  |  |  |
| Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.  4/01/13 and every three years  Check all applicable boxes   |  |  |  |  |  |
| A plan is being filed with this p  |  |  |  |  |  |
| Acceptances of the plan were so of creditors, in accordance with   | solicited prepetition from one or more classes h 11 U.S.C. § 1126(b).  |  |  |  |  |
| Statistical/Administrative Information   | THIS SPACE IS FOR<br>COURT USE ONLY  |  |  |  |  |
| <ul> <li>□ Debtor estimates that funds will be available for distribution to unsecured creditors.</li> <li>☑ Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.</li> </ul> | COURT USE ONLY   |  |  |  |  |
| Estimated Number of Creditors  |  |  |  |  |  |
| 1- 50- 100- 200- 1,000- 5,001- 10,001- 25,001- 50,001- Over<br>49 99 199 999 5,000 10,000 25,000 50,000 100,000 100,000  |  |  |  |  |  |
|  | lore than \$1<br>llion   |  |  |  |  |
| Estimated Liabilities  | ore than \$1   |  |  |  |  |

B1 (Official Form 1) (4/10) FORM B1, Page 2

| · / /  |  | , 6  |  |  |
|--|--|--|--|--|
| Voluntary Petition   | Name of Debtor(s):   |  |  |  |
| (This page must be completed and filed in every case)  | Evan J. Clements   |  |  |  |
| All Prior Bankruptcy Cases Filed Within La   | st 8 Years (If more than two, attach additional sheet.)  |  |  |  |
| Location Where Filed: NONE   | Case Number:   | Date Filed:  |  |  |
| Location<br>Where Filed:   | Case Number:   | Date Filed:  |  |  |
| Pending Bankruptcy Case Filed by any Spouse, Partner of  | r Affiliate of this Debtor (If more than one, attach ad  | ditional sheet)  |  |  |
| Name of Debtor: NONE   | Case Number:   | Date Filed:  |  |  |
| District:  | Relationship:  | Judge:   |  |  |
| Exhibit A  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  | Exhibit B  (To be completed if debtor is a whose debts are primarily con.  I, the attorney for the petitioner named in the foregoin have informed the petitioner that [he or she] may prospect 12, or 13 of title 11, United States Code, and have estavailable under each such chapter. I further certify the debtor the notice required by 11 U.S.C. § 342(b). | sumer debts) ng petition, declare that I ceed under chapter 7, 11, xplained the relief |  |  |
| Exhibit A is attached and made a part of this petition.  | X /s/ Kevin O'Rourke   | 10/21/2010   |  |  |
|  | Signature of Attorney for Debtor(s) <b>Kevin O'Rourke</b>  | Date <b>28912</b>  |  |  |
| Ext  | nibit C  | 20712  |  |  |
| Does the debtor own or have possession of any property that poses or is alleged to pose a  Yes, and Exhibit C is attached and made a part of this petition.  No  | threat of imminent and identifiable harm to public healt   | th or safety?  |  |  |
| Exh  | aibit D  |  |  |  |
| (To be completed by every individual debtor. If a joint petition is filed, each spouse must<br>Exhibit D completed and signed by the debtor is attached and made a part of the lift this is a joint petition:  |  |  |  |  |
| Exhibit D also completed and signed by the joint debtor is attached and made a   | a part of this petition.   |  |  |  |
|  | ding the Debtor - Venue  |  |  |  |
| Debtor has been domiciled or has had a residence, principal place preceding the date of this petition or for a longer part of such 180 or  |  | nys immediately  |  |  |
| There is a bankruptcy case concerning debtor's affiliate. general pa   | artner, or partnership pending in this District.   |  |  |  |
| Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District. or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. |  |  |  |  |
|  | des as a Tenant of Residential Property oplicable boxes.)  |  |  |  |
| Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following).   |  |  |  |  |
| (Name of landlord that obtained judgment)  |  |  |  |  |
|  | (Address of landlord)  |  |  |  |
| Debtor claims that under applicable nonbankruptcy law, there are entire monetary default that gave rise to the judgment for possession   |  | ed to cure the   |  |  |
| Debtor has included in this petition the deposit with the court of an filing of the petition.  | ny rent that would become due during the 30-day period   | after the  |  |  |
| Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).  |  |  |  |  |

| of (Official Form 1) (4/10)  | FORWI BI, I age  |
|--|--|
| Voluntary Petition   | Name of Debtor(s):   |
| (This page must be completed and filed in every case)  | Evan J. Clements   |
| Sign   | l<br>natures   |
| Signature(s) of Debtor(s) (Individual/Joint)   | Signature of a Foreign Representative  |
| I declare under penalty of perjury that the information provided in this petition is true and correct.  [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.  [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.  (Check only <b>one</b> box.)  I request relief in accordance with chapter 15 of Title 11, United States Code. Certified Copies of the documents required by § 1515 of title 11 are attached.  Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the Chapter of title 11 specified in the petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.  |
| X /s/ Evan J. Clements   | X Not Applicable   |
| Signature of Debtor Evan J. Clements   | (Signature of Foreign Representative)  |
| X Not Applicable   |  |
| Signature of Joint Debtor  | (Printed Name of Foreign Representative)   |
| Telephone Number (If not represented by attorney)  |  |
| 10/21/2010   | Date   |
| Date   |  |
| X /s/ Kevin O'Rourke Signature of Attorney for Debtor(s)  Kevin O'Rourke Bar No. 28912  Printed Name of Attorney for Debtor(s) / Bar No.  Southwell & O'Rourke Firm Name  960 Paulsen Building 421 W. Riverside Avenue  Address  Spokane, WA 99201  (509) 624-0159 (509) 624-9231  Telephone Number  10/21/2010  Date  *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.   | I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.  Not Applicable  Printed Name and title, if any, of Bankruptcy Petition Preparer  Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)  Address |
| Signature of Debtor (Corporation/Partnership)  | X Not Applicable   |
| I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.  The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.  X Not Applicable Signature of Authorized Individual  Printed Name of Authorized Individual  Title of Authorized Individual  | Date Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.  Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.  If more than one person prepared this document, attach to the appropriate official form for each person.  A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.  |
| Date   |  |

#### **UNITED STATES BANKRUPTCY COURT**

#### **Eastern District of Washington**

| In re | Evan J. Clements | Case No. |            |
|-------|------------------|----------|------------|
|       | Debtor           | ·        | (if known) |
|       |                  |          |            |

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

| 1. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunition available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.   |    |
|--|----|
| 2. Within the <b>180 days before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunition available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed. |    |
| ☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now [Summarize exigent circumstances here.]   | ٧. |
|  |    |

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

Solution of 11 U.S.C. 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Evan J. Clements

Evan J. Clements

Date: 10/21/2010

B 1D (Official Form 1, Exh. D) (12/09) - Cont.

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF WASHINGTON

| Evan J.   | Clements   |   | Case No  |
|-----------|--|---|--|
|           |  | Debtor  |  |
|           | VE   | RIFICATION (  | OF CREDITOR MATRIX   |
| the attac | hed Master Mailin  | g List of creditors, consis                         | y if applicable, do hereby certify under penalty of perjury that ting of <b>2</b> sheet(s) is complete, correct and consistent with the les and I/we assume all responsibility for errors and omissions. |
| Dated:    | 10/21/2010   |   | Signed: /s/ Evan J. Clements Evan J. Clements  |
| Signed:   | Isl Kevin O'Rou<br>Kevin O'Rourke<br>Attorney for Debtor<br>Bar no.:<br>Southwell & O'<br>960 Paulsen Bu<br>421 W. Riversio<br>Spokane, WA 9<br>Telephone No.:<br>Fax No.: | e<br>(s)<br>28912<br>Rourke<br>iilding<br>de Avenue |  |

E-mail address:

Evan J. Clements 6704 N. Monroe Spokane, WA 99208

Kevin O'Rourke Southwell & O'Rourke 960 Paulsen Building 421 W. Riverside Avenue Spokane, WA 99201

Adept Escrow Services, Inc. PO Box 18039 Spokane, WA 99228

HSBC Retail Services - Suzuki PO Box 60107 City of Industry, CA 91716-0107

Joe and Jane Clements 16508 N. Brannon Lane Spokane, WA 99208

Joe and Jane Clements 16508 N. Brannon Spokane, WA 99208

Laura Clements 6104 S. Magnolia Spokane, WA 99223

MIchael J. Beyer Attorney at Law 1403 W. Broadway Spokane, WA 99201

Southwell & O'Rourke, P.S. 960 Paulsen Building 421 W. Riverside Avenue Spokane, WA 99201 USAA Credit Card Payments 10750 McDermott FWY San Antonio, TX 78288-0570

# UNITED STATES BANKRUPTCY COURT Eastern District of Washington

|    |         |                      |   | ⊏as                     | stern District o          | or washington   |        |               |   |
|----|---------|----------------------|---|-------------------------|---------------------------|---|--------|---------------|---|
| ln | re:     | Eva                  | n J. Clements   |                         |                           | Case  |        |               |   |
|    |         |                      | Debtor  |                         |                           | Chapt   | er     | 13            |   |
|    |         |                      | DISCLOSURE  | E 0                     | F COMPEN                  | ISATION OF ATTORN<br>BTOR   | ۱E۱    | ď             |   |
| 1. | and th  | at compe<br>me, for  | U.S.C. § 329(a) and Bankruptcy R ensation paid to me within one year be services rendered or to be rendered in the bankruptcy case is as follows: | befor                   | e the filing of the petit | , , ,   | debto  | or(s)         |   |
|    | Fo      | or legal s           | ervices, I have agreed to accept  |                         |                           |   | \$     | <b>.</b>      | * |
|    | Pı      | rior to the          | filing of this statement I have receive   | ved                     |                           |   | \$     | <b>.</b>      | * |
|    | Ва      | alance D             | ue  |                         |                           |   | \$     | <b></b>       |   |
| 2. | The so  | ource of o           | compensation paid to me was:  |                         |                           |   |        |               |   |
|    |         | <b>☑</b> De          | ebtor   | $\overline{\mathbf{Q}}$ | Other (specify)           | *\$250.00 per hour plus cos   | ts.    |               |   |
| 3. | The so  | ource of o           | compensation to be paid to me is:   |                         |                           |   |        |               |   |
|    |         | ☐ De                 | ebtor   |                         | Other (specify)           |   |        |               |   |
| 4. | Ø       | I have n<br>of my la | =   | sed o                   | ompensation with an       | y other person unless they are member                                       | ers an | nd associates |   |
|    |         |                      | irm. A copy of the agreement, toget   |                         | •                         | on or persons who are not members ones of the people sharing in the compens |        |               |   |
| 5. | In retu |                      | e above-disclosed fee, I have agreed  | to re                   | ender legal service fo    | r all aspects of the bankruptcy case,                                       |        |               |   |
|    | a)      | •                    | s of the debtor's financial situation, a<br>n in bankruptcy;  | ınd re                  | endering advice to the    | e debtor in determining whether to file                                     |        |               |   |
|    | b)      | Prepara              | tion and filing of any petition, schedu   | ules,                   | statement of affairs,     | and plan which may be required;   |        |               |   |
|    | c)      | Represe              | entation of the debtor at the meeting   | of cr                   | editors and confirmat     | ion hearing, and any adjourned hearin                                       | gs the | ereof;        |   |
|    | d)      | [Other p             | rovisions as needed]  |                         |                           |   |        |               |   |
| 6. | By ag   |                      | with the debtor(s) the above disclos  | ed fe                   | e does not include th     | e following services:   |        |               |   |
|    |         |                      |   |                         |                           |   |        |               |   |
|    |         |                      |   |                         | CERTIFICA                 | ATION   |        |               |   |
| r  |         | •                    | ne foregoing is a complete statement<br>f the debtor(s) in this bankruptcy pro  |                         |                           | ngement for payment to me for   |        |               |   |
| [  | Dated:  | 10/21/2              | 2010  |                         |                           |   |        |               |   |
|    |         |                      |   |                         | /s/ Kevin C               |   |        |               |   |
|    |         |                      |   |                         | Kevin O'R                 | ourke, Bar No. 28912  |        |               |   |
|    |         |                      |   |                         | Southwell<br>Attorney for | & O'Rourke Debtor(s)  |        |               |   |
|    |         |                      |   |                         | 1                         | - 1-1   |        |               |   |

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2.

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF WASHINGTON

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <a href="mailto:before">before</a> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF WASHINGTON

| In re Evan J. Clements Debtor  | Case No               |            |  |  |  |
|--|-----------------------|------------|--|--|--|
|  | Chapter13             |            |  |  |  |
| CERTIFICAT<br>UNDER  | DR(S)                 |            |  |  |  |
| Certificate of the Debtor  I , the debtor, affirm that I have received and read this notice, as required by § 342(b) of the Bankruptcy Code. |                       |            |  |  |  |
| Evan J. Clements   | X/s/ Evan J. Clements | 10/21/2010 |  |  |  |
| Printed Name of Debtor   | Evan J. Clements      |            |  |  |  |
| Case No. (if known)  | Signature of Debtor   | Date       |  |  |  |
|  |                       |            |  |  |  |
|  |                       |            |  |  |  |
|  |                       |            |  |  |  |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

| B22C (Official Form 22C) (Chapter 13) (04/10) | According to the calculations required by this statement:           |  |  |
|---|---|--|--|
|   | ☑ The applicable commitment period is 3 years.                      |  |  |
| In re Evan J. Clements                        | The applicable commitment period is 5 years.                        |  |  |
| Debtor(s)                                     | ☐ Disposable income is determined under § 1325(b)(3)                |  |  |
| Case Number:                                  | ✓ Disposable income is not determined under § 1325(b)(3)            |  |  |
| (If known)                                    | (Check the boxes as directed in Lines 17 and 23 of this statement.) |  |  |

### CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

|   | Part I. REPOR   | T OF INCOME  |                                |                                |  |  |  |
|---|---|--|--------------------------------|--------------------------------|--|--|--|
| _ | Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.  a.   Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.  |  |                                |                                |  |  |  |
| 1 | b. Married. Complete both Column A ("Debtor's I   | ncome") and Column B (Spouse's                                   | Income) for L                  | ines 2-10.                     |  |  |  |
|   | All figures must reflect average monthly income received f<br>six calendar months prior to filing the bankruptcy case, end<br>before the filing. If the amount of monthly income varied d<br>divide the six-month total by six, and enter the result on the                               | ding on the last day of the month uring the six months, you must | Column A<br>Debtor's<br>Income | Column B<br>Spouse's<br>Income |  |  |  |
| 2 | Gross wages, salary, tips, bonuses, overtime, commis  | ssions.  | \$3,535.33                     | \$0.00                         |  |  |  |
| 3 | Income from the operation of a business, profession of Line a and enter the difference in the appropriate column(sthan one business, profession or farm, enter aggregate nuattachment. Do not enter a number less than zero. Do not expenses entered on Line b as a deduction in Part IV. |  |                                |                                |  |  |  |
|   | a. Gross Receipts   | \$ 0.00  |                                |                                |  |  |  |
|   | b. Ordinary and necessary business expenses   | \$ 0.00  |                                |                                |  |  |  |
|   | c. Business income  | Subtract Line b from Line a                                      | \$0.00                         | \$0.00                         |  |  |  |
| 4 | Rent and other real property income. Subtract Line b from the appropriate column(s) of Line 4. Do not enter a number include any part of the operating expenses entered on  a. Gross Receipts b. Ordinary and necessary operating expenses c. Rent and other real property income         | mber less than zero. Do not                                      | \$0.00                         | \$0.00                         |  |  |  |
| 5 | Interest, dividends, and royalties.   |  | \$0.00                         | \$0.00                         |  |  |  |
| 6 | Pension and retirement income.  |  | \$0.00                         | \$0.00                         |  |  |  |
| 7 | Any amounts paid by another person or entity, on a re expenses of the debtor or the debtor's dependents, in that purpose. Do not include alimony or separate mainter by the debtor's spouse.  | cluding child support paid for                                   | \$0.00                         | \$0.00                         |  |  |  |

|    |  |   |   | 1  | 1           |
|----|--|---|---|--|-------------|
| 8  | Unemployment compensation. Enter the and However, if you contend that unemployment of was a benefit under the Social Security Act, of Column A or B, but instead state the amount  | by you or your spouse   |   |  |             |
|    | Unemployment compensation claimed to be a benefit under the Social Security Act  | Debtor \$   | Spouse \$   | \$   | \$          |
| 9  | Income from all other sources. Specify sour sources on a separate page. Total and enter of maintenance payments paid by your spour or separate maintenance. Do not include a Act or payments received as a victim of a war of international or domestic terrorism.   | on Line 9. <b>Do not includ</b> se, but include all othe any benefits received und  | de alimony or separate er payments of alimony der the Social Security   |  |             |
|    | a.   | \$  |   | \$0.00   | \$0.00      |
| 10 | Subtotal. Add Lines 2 thru 9 in Column A, an in Column B. Enter the total(s).  | nd, if Column B is compl  | eted, add Lines 2 thru 9  | \$3,535.33   | \$0.00      |
| 11 | <b>Total.</b> If Column B has been completed, add enter the total. If Column B has not been com A.   |   |   | \$ 3,535.33  |             |
|    | Part II. CALCULATIO  | N OF § 1325(b)(4) C   | OMMITMENT PERIO   |  |             |
| 12 | Enter the amount from Line 11.   |   |   |  | \$ 3,535.33 |
| 13 | Marital adjustment. If you are married, but a calculation of the commitment period under § spouse, enter on Line 13 the amount of the in regular basis for the household expenses of y basis for excluding this income (such as payn persons other than the debtor or the debtor's purpose. If necessary, list additional adjustment do not apply, enter zero. | 1325(b)(4) does not red<br>come listed in Line 10, (<br>ou or your dependents a<br>nent of the spouse's tax<br>dependents) and the am | quire inclusion of the incor<br>Column B that was NOT p<br>and specify, in the lines be<br>liability or the spouse's su<br>count of income devoted to | ne of your<br>aid on a<br>low, the<br>ipport of<br>beach |             |
|    | a.   |   | \$  |  | \$0.00      |
|    | Total and enter on Line 13.  |   |   |  |             |

|     |   | _    |              |
|-----|---|------|--------------|
| 14  | Subtract Line 13 from Line 12 and enter the result.   | \$   | 3,535.33     |
| 15  | Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.   | \$   | 42,423.96    |
| 16  | Applicable median family income. Enter the median family income for applicable state and household size. (This information is available by family size at <a href="www.usdoj.gov/ust">www.usdoj.gov/ust</a> or from the clerk of the bankruptcy court.)  a. Enter debtor's state of residence:  WA  b. Enter debtor's household size:  1  | \$   | 51,161.00    |
| 17  | Application of § 1325(b)(4). Check the applicable box and proceed as directed.  ☑ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commission of the state o | nitr | ment period  |
| 17  | is 3 years" at the top of page 1 of this statement and continue with this statement.  The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable co period is 5 years" at the top of page 1 of this statement and continue with this statement.  | mm   | nitment      |
|     | Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCOME   |      |              |
| 18  | Enter the amount from Line 11.  | \$   | 3,535.33     |
| 19  | <b>Marital adjustment.</b> If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.  |      |              |
|     | a. \$   | \$   | 0.00         |
|     | Total and enter on Line 19.   |      |              |
| 20  | Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.  | \$   | 3,535.33     |
| 21  | Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result.   | \$   | 42,423.96    |
| 22  | Applicable median family income. Enter the amount from Line 16  | \$   | 51,161.00    |
|     | Application of § 1325(b)(3). Check the applicable box and proceed as directed.  |      |              |
| 23  | ☐ The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is detended 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement.   | ermi | ined under § |
|     | The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is nunder § 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Parts IV   |      |              |
|     | Part IV. CALCULATION OF DEDUCTIONS FROM INCOME  |      |              |
|     | Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)   |      |              |
| 24A | National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable household size. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)  | \$   |              |
|     |   |      |              |
|     |   |      |              |
|     |   |      |              |

| National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 16b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B. |   |  |                      |  |                                  |    |  |  |
|---|---|--|----------------------|--|----------------------------------|----|--|--|
|   | Household members under 65 years of age  Household members 65 years of age or older   |  |                      |  |                                  |    |  |  |
|   | a1. Allowance per member  |  | a2. A                | llowance per member                                      |                                  |    |  |  |
|   | b1. Number of members   |  | <sub>b2.</sub> N     | lumber of members  |                                  |    |  |  |
|   | c1. Subtotal  |  | c2. S                | ubtotal  |                                  | \$ |  |  |
| 25A   | Local Standards: housing and utiliand Utilities Standards; non-mortga information is available at www.usd   | ge expenses for th                       | ne applio            | able county and household                                |                                  | \$ |  |  |
| 25B   | Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero. |  |                      |  |                                  |    |  |  |
|   | a. IRS Housing and Utilities Stand  | lards; mortgage/rent e                   | expense              | \$   | ]                                |    |  |  |
|   | b. Average Monthly Payment for an any, as stated in Line 47.  | ny debts secured by h                    | nome, if             | \$   | 1                                |    |  |  |
|   | C. Net mortgage/rental expense  |  |                      | Subtract Line b from Line a                              | <u> </u>                         | \$ |  |  |
| 26  | Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and  |  |                      |  |                                  |    |  |  |
| Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  |   |  |                      |  |                                  |    |  |  |
| 27A   | Check the number of vehicles for wl are included as a contribution to you   |  |                      |  | pperating expenses<br>2 or more. |    |  |  |
| If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards:  |   |  |                      |  |                                  | \$ |  |  |
| 27B   | Local Standards: transportation; expenses for a vehicle and also use additional deduction for your public amount from IRS Local Standards: the clerk of the bankruptcy court.)  | public transportat<br>transportation exp | ion, and<br>enses, e | you contend that you are elenter on Line 27B the "Public | ntitled to an Transportation"    | \$ |  |  |
|   |   |  |                      |  |                                  |    |  |  |

| 28   | Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. <b>Do not enter an amount less than zero.</b> a. IRS Transportation Standards, Ownership Costs  b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47. |   |                                  |    |  |  |
|--|--|---|----------------------------------|----|--|--|
|  | c. Net ownership/lease expense for Venicle 1   | Subtract Line b from Line a   |                                  | \$ |  |  |
| 29   | Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. <b>Do not enter an amount less than zero.</b> [a.] IRS Transportation Standards, Ownership Costs  [§   |   |                                  |    |  |  |
|  | b. Average Monthly Payment for any debts secured by Vehicle 2,   | \$  |                                  |    |  |  |
|  | as stated in Line 47  c. Net ownership/lease expense for Vehicle 2   | Subtract Line b from Line a   |                                  | \$ |  |  |
| 30   | Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes. social security taxes. and Medicare taxes. Do not include real estate or sales taxes.                  |   |                                  |    |  |  |
|  | Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly   |   |                                  |    |  |  |
| 31   | payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. <b>Do not include discretionary amounts, such as voluntary 401(k) contributions.</b>  |   |                                  |    |  |  |
| Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.                                  |  |   |                                  |    |  |  |
| Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 49. |  |   |                                  |    |  |  |
| 34   | Other Necessary Expenses: education for employment of child. Enter the total average monthly amount that you actually employment and for education that is required for a physically whom no public education providing similar services is available.   | y expend for education that i<br>or mentally challenged depe<br>le. | s a condition of ndent child for | \$ |  |  |
| 35   | Other Necessary Expenses: childcare. Enter the total average childcare—such as baby-sitting, day care, nursery and preschopayments.  |   | lucational                       | \$ |  |  |
| 36   | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend   |   |                                  |    |  |  |
|  | Other Necessary Expenses: telecommunication services.  |   |                                  |    |  |  |
| 37   | you actually pay for telecommunication services other than you service—such as pagers, call waiting, caller id, special long di  |   |                                  |    |  |  |
|  | necessary for your health and welfare or that of your dependen deducted.   |   | unt proviously                   | \$ |  |  |
| 38   | Total Expenses Allowed under IRS Standards. Enter the total  | of Lines 24 through 37.   |                                  | \$ |  |  |
|  | Subpart B: Additional Living   |   |                                  |    |  |  |
|  |  |   |                                  |    |  |  |

| Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.   |    | Note: Do not include any expenses that you have listed in Lines 24-37 |                        |                                    |                           |                                   |              |  |  |
|--|----|---|------------------------|------------------------------------|---------------------------|-----------------------------------|--------------|--|--|
| Spouse, or your dependents.   Spouse, or your dependents.  |    |   |                        |                                    |                           |                                   |              |  |  |
| Total and enter on Line 39   If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:   |    |   |                        |                                    | at are reasonably nece    | ssary for yourself, your          |              |  |  |
| D. Disability Insurance   S  |    | <u> </u>  | <u> </u>               | J.                                 | T.\$                      |                                   |              |  |  |
| Total and enter on Line 39  If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:  S  Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.  Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.  Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.  Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed 5147.92° per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and value average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing expenses exceed the combined allowances for food and clothing expenses exceed the combined allowances for food and clothing expenses exceed the combined allowances for food and clothing expenses exceed the combined allowances for food and clothing expenses exceed the combined allowances for food and clothing expenses exceed the combined allowances for food an       | 39 |   |                        | ce                                 | · ·                       |                                   |              |  |  |
| Total and enter on Line 39   If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:   S   |    | C.  | Health Savings A       | ccount                             | \$                        |                                   |              |  |  |
| Total and enter on Line 39   If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:   S   |    |   |                        |                                    | •                         |                                   |              |  |  |
| If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: S  |    | Total   | and enter on Line 39   |                                    |                           |                                   | \$           |  |  |
| Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an eiderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments ifsted in Line 34.  Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.  Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.  Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92" per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.  Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed \$5% of those combined allowances. (This information is available at www.usdoj.gov/usl/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary and instruments to a charitable orga     |    |   |                        |                                    |                           |                                   |              |  |  |
| Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.  41 Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.  42 Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessarv.  43 Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92° per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.  444 Additional Good and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances of food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoi.gov/iss/go      |    |   | pace below:            |                                    | •                         |                                   |              |  |  |
| anonthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.  Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.  Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.  Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92° per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS standards.  Additional food and clothing expenses Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS hational Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.   Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form      |    | \$  |                        |                                    |                           |                                   |              |  |  |
| elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.  Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.  Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS brovide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.  Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92" per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS standards.  Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoi.gov/us/vs/for from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.   Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(cl)(1-(2). Do not include any amount in excess of 15% of your gross monthly income.  Total Additional Expense      |    |   |                        |                                    |                           |                                   |              |  |  |
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| Subpart C: Deductions for Debt Payment  Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.  Name of Creditor Property Securing the Debt Average Monthly include taxes   |    | 26 U.   | S.C. § 170(c)(1)-(2).  | Do not include any amount          | in excess of 15% of       | your gross monthly income         | 9.           |  |  |
| Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.    Name of   Property Securing the Debt   Average   Does payment include taxes   Does payment         | 46 | Total   | Additional Expense     | Deductions under § 707(b           | ). Enter the total of Lin | nes 39 through 45.                | \$           |  |  |
| you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.    Name of Creditor   Property Securing the Debt   Average Monthly   Does payment include taxes   Does payment inc       |    |   |                        | Subpart C: Deduc                   | tions for Debt Paym       | ent                               |              |  |  |
| you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.    Name of Creditor   Property Securing the Debt Monthly   Average Monthly include taxes   Does payment include ta       |    | Futui   | re payments on sec     | ured claims. For each of vol       | ur debts that is secured  | d by an interest in property that | at           |  |  |
| total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.    Name of Creditor  |    | you o   | own, list the name of  | he creditor, identify the prope    | erty securing the debt,   | state the Average Monthly         |              |  |  |
| filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.    Name of Creditor  |    |   |                        |                                    |                           |                                   |              |  |  |
| the total of the Average Monthly Payments on Line 47.  Name of Creditor Property Securing the Debt Monthly include taxes   |    |   |                        |                                    |                           |                                   |              |  |  |
| Creditor Monthly include taxes   | 47 |   |                        |                                    | •                         |                                   |              |  |  |
|  |    |   |                        | Property Securing the Debt         |                           |                                   | 71           |  |  |
|  |    |   | Creditor               |                                    |                           |                                   |              |  |  |
| a.   a.   yes 🗖 no   |    | a.  |                        |                                    | •                         |                                   | <del> </del> |  |  |
| Total: Add Lines a, b and c \$   |    | <u> </u>  |                        | <u> </u>                           |                           |                                   | <b>-</b>     |  |  |

| 48  | page.  |  |                |  |  |  |  |
|---|--|--|----------------|--|--|--|--|
|   | Name of Creditor Property Securing the Debt  | 1/60th of the Cure Amount  |                |  |  |  |  |
|   |  | Total: Add Lines a, b and c  | \$             |  |  |  |  |
| 49  | <b>Payments on prepetition priority claims</b> . Enter the total amount, divid as priority tax, child support and alimony claims, for which you were liab filing. <b>Do not include current obligations, such as those set out in L</b>  | le at the time of your bankruptcy  | \$             |  |  |  |  |
|   | <b>Chapter 13 administrative expenses</b> . Multiply the amount in line a by resulting administrative expense.   |  |                |  |  |  |  |
|   | <ul><li>a. Projected average monthly Chapter 13 plan payment.</li><li>b. Current multiplier for your district as determined under schedules issued</li></ul>   | \$   |                |  |  |  |  |
| 50  | by the Executive Office for United States Trustees. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy  |  |                |  |  |  |  |
|   | c. Average monthly administrative expense of Chapter 13 case   | X  |                |  |  |  |  |
|   | Total: Multiply Lines a and b  |  |                |  |  |  |  |
| 51  | Total Deductions for Debt Payment. Enter the total of Lines 47 through 50.   |  | \$             |  |  |  |  |
|   | Subpart D: Total Deductions from   | Income   |                |  |  |  |  |
| Total of all deductions from income. Enter the total of Lines 38, 46, and 51. |  |  |                |  |  |  |  |
|   |  |  |                |  |  |  |  |
|   | Part V. DETERMINATION OF DISPOSABLE INC  | OME UNDER § 1325(b)(2)   |                |  |  |  |  |
| 53  | Part V. DETERMINATION OF DISPOSABLE INCO   | OME UNDER § 1325(b)(2)   | \$             |  |  |  |  |
| 53  |  | ayments, foster care payments, or ceived in accordance with applicable   |                |  |  |  |  |
|   | Total current monthly income. Enter the amount from Line 20.  Support income. Enter the monthly average of any child support p disability payments for a dependent child, reported in Part I, that you recommend to the commendation of the commendati | ayments, foster care payments, or ceived in accordance with applicable for such child.  amounts withheld by your employer d in § 541(b)(7) and (b) all required  | \$             |  |  |  |  |
| 54  | Total current monthly income. Enter the amount from Line 20.  Support income. Enter the monthly average of any child support processed disability payments for a dependent child, reported in Part I, that you recombankruptcy law, to the extent reasonably necessary to be expended from wages as contributions. Enter the monthly total of (a) all a from wages as contributions for qualified retirement plans, as specified   | ayments, foster care payments, or ceived in accordance with applicable for such child.  amounts withheld by your employer d in § 541(b)(7) and (b) all required  | \$             |  |  |  |  |
| 54  | Total current monthly income. Enter the amount from Line 20.  Support income. Enter the monthly average of any child support processed disability payments for a dependent child, reported in Part I, that you recombankruptcy law, to the extent reasonably necessary to be expended from wages as contributions. Enter the monthly total of (a) all a from wages as contributions for qualified retirement plans, as specified repayments of loans from retirement plans, as specified in § 362(b)(19).  Total of all deductions allowed under § 707(b)(2). Enter the amount for which there is no reasonable alternative, describe the special circumstant for which there is no reasonable alternative, describe the special circumstant in lines a-c below. If necessary, list additional entries on a separate page total in Line 57. You must provide your case trustee with document must provide a detailed explanation of the special circumstant necessary and reasonable.  | ayments, foster care payments, or ceived in accordance with applicable for such child.  amounts withheld by your employer d in § 541(b)(7) and (b) all required from Line 52.  The case that justify additional expenses instances and the resulting expenses are ge. Total the expenses and enter the tation of these expenses and you nees that make such expenses   | \$<br>\$       |  |  |  |  |
| 54<br>55<br>56  | Total current monthly income. Enter the amount from Line 20.  Support income. Enter the monthly average of any child support provided in Part I, that you reasonability payments for a dependent child, reported in Part I, that you reasonability payments for a dependent child, reported in Part I, that you reasonability payments of be expended from wages as contributions. Enter the monthly total of (a) all a from wages as contributions for qualified retirement plans, as specified repayments of loans from retirement plans, as specified in § 362(b)(19).  Total of all deductions allowed under § 707(b)(2). Enter the amount for which there is no reasonable alternative, describe the special circumstant for which there is no reasonable alternative, describe the special circumstant in lines a-c below. If necessary, list additional entries on a separate page total in Line 57. You must provide your case trustee with document must provide a detailed explanation of the special circumstant.   | ayments, foster care payments, or ceived in accordance with applicable for such child.  amounts withheld by your employer d in § 541(b)(7) and (b) all required from Line 52.  Inces that justify additional expenses instances and the resulting expenses ge. Total the expenses and enter the tation of these expenses and you   | \$<br>\$       |  |  |  |  |
| 54<br>55<br>56  | Total current monthly income. Enter the amount from Line 20.  Support income. Enter the monthly average of any child support processed disability payments for a dependent child, reported in Part I, that you recombankruptcy law, to the extent reasonably necessary to be expended from wages as contributions. Enter the monthly total of (a) all a from wages as contributions for qualified retirement plans, as specified repayments of loans from retirement plans, as specified in § 362(b)(19).  Total of all deductions allowed under § 707(b)(2). Enter the amount for which there is no reasonable alternative, describe the special circumstant for which there is no reasonable alternative, describe the special circumstant in lines a-c below. If necessary, list additional entries on a separate page total in Line 57. You must provide your case trustee with document must provide a detailed explanation of the special circumstant necessary and reasonable.  | ayments, foster care payments, or ceived in accordance with applicable for such child.  amounts withheld by your employer d in § 541(b)(7) and (b) all required from Line 52.  The case that justify additional expenses instances and the resulting expenses are ge. Total the expenses and enter the tation of these expenses and you nees that make such expenses   | \$<br>\$       |  |  |  |  |
| 54<br>55<br>56  | Total current monthly income. Enter the amount from Line 20.  Support income. Enter the monthly average of any child support provided in Part I, that you reasonability payments for a dependent child, reported in Part I, that you reasonabily necessary to be expended from the extent reasonably necessary to be expended from wages as contributions for qualified retirement plans, as specified repayments of loans from retirement plans, as specified in § 362(b)(19).  Total of all deductions allowed under § 707(b)(2). Enter the amount for which there is no reasonable alternative, describe the special circumstant for which there is no reasonable alternative, describe the special circumstant in lines a-c below. If necessary, list additional entries on a separate page total in Line 57. You must provide your case trustee with document must provide a detailed explanation of the special circumstant necessary and reasonable.  Nature of special circumstances   | ayments, foster care payments, or ceived in accordance with applicable for such child.  amounts withheld by your employer d in § 541(b)(7) and (b) all required from Line 52.  The case that justify additional expenses instances and the resulting expenses are ge. Total the expenses and enter the tation of these expenses and you need that make such expenses.  Amount of expense   | \$<br>\$       |  |  |  |  |
| 54<br>55<br>56  | Total current monthly income. Enter the amount from Line 20.  Support income. Enter the monthly average of any child support p disability payments for a dependent child, reported in Part I, that you remonbankruptcy law, to the extent reasonably necessary to be expended from wages as contributions. Enter the monthly total of (a) all a from wages as contributions for qualified retirement plans, as specified repayments of loans from retirement plans, as specified in § 362(b)(19).  Total of all deductions allowed under § 707(b)(2). Enter the amount for which there is no reasonable alternative, describe the special circumstant for which there is no reasonable alternative, describe the special circum in lines a-c below. If necessary, list additional entries on a separate page total in Line 57. You must provide your case trustee with documen must provide a detailed explanation of the special circumstant necessary and reasonable.  Nature of special circumstances  a.   | ayments, foster care payments, or ceived in accordance with applicable for such child.  amounts withheld by your employer d in § 541(b)(7) and (b) all required from Line 52.  The case that justify additional expenses a stances and the resulting expenses are contacted in the station of these expenses and enter the station of these expenses and you not that make such expenses  Amount of expense  \$ Total: Add Lines a, b, and c | \$<br>\$<br>\$ |  |  |  |  |
| 54<br>55<br>56  | Total current monthly income. Enter the amount from Line 20.  Support income. Enter the monthly average of any child support provided in Part I, that you reasonability payments for a dependent child, reported in Part I, that you reasonabily necessary to be expended from the extent reasonably necessary to be expended from wages as contributions for qualified retirement plans, as specified repayments of loans from retirement plans, as specified in § 362(b)(19).  Total of all deductions allowed under § 707(b)(2). Enter the amount for which there is no reasonable alternative, describe the special circumstant for which there is no reasonable alternative, describe the special circumstant in lines a-c below. If necessary, list additional entries on a separate page total in Line 57. You must provide your case trustee with document must provide a detailed explanation of the special circumstant necessary and reasonable.  Nature of special circumstances   | ayments, foster care payments, or ceived in accordance with applicable for such child.  amounts withheld by your employer d in § 541(b)(7) and (b) all required from Line 52.  The case that justify additional expenses a stances and the resulting expenses are contacted in the station of these expenses and enter the station of these expenses and you not that make such expenses  Amount of expense  \$ Total: Add Lines a, b, and c | \$<br>\$<br>\$ |  |  |  |  |

| 59 | Monthly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and enter the result.  |   |  |  |  |  |  |  |
|----|--|---|--|--|--|--|--|--|
|    | Part VI. ADDITIONAL EXPENSE CLAIMS   |   |  |  |  |  |  |  |
| 60 | Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses. |   |  |  |  |  |  |  |
|    | Expense Description Monthly Amount   |   |  |  |  |  |  |  |
|    | Total: Add Lines a, b, and c \$  |   |  |  |  |  |  |  |
|    | Part VII: VERIFICATION   |   |  |  |  |  |  |  |
| 6  | I declare under penalty of perjury that the information provided in this statement is true and correct. (If this a joint case both debtors must sign.)  Date: 10/21/2010 Signature: /s/ Evan J. Clements  Evan J. Clements, (Debtor)   | , |  |  |  |  |  |  |

# UNITED STATES BANKRUPTCY COURT Eastern District of Washington

| Evan J. Clements   |  | ,   | Case No.   |  |  |  |
|--|--|---|--|--|--|--|
|  |  | Debtor  | (If  | known)   |  |  |
|  | STATE  | MENT OF FINANC  | CIAL AFFAIRS   |  |  |  |
| 1. Income from   | employment or op   | peration of business  |  |  |  |  |
| debtor's business, ir<br>beginning of this cal<br>years immediately p<br>of a fiscal rather tha<br>fiscal year.) If a join                 | ncluding part-time activi<br>lendar year to the date to<br>preceding this calendar<br>in a calendar year may<br>t petition is filed, state interincome of both spous | ties either as an employee of<br>this case was commenced.<br>year. (A debtor that maintain<br>report fiscal year income. Iconcome for each spouse sep     | yment, trade, or profession, or from the independent trade or busines of the gross amounts receives, or has maintained, financial dentify the beginning and ending arately. (Married debtors filing unetition is filed, unless the spouse: | ess, from the ceived during the <b>two</b> records on the basis dates of the debtor's nder chapter 12 or |  |  |
| AMOUNT   | SOURCE   |   | FISCAL YEAR PERIOD   |  |  |  |
| 39,343.00  | Employm  | ent   | 2008   |  |  |  |
| 40,275.00  | Employm  | ent   | 2009   |  |  |  |
| 33,469.00  | Employm  | ent   | 2010 thru 10/5/10  |  |  |  |
| State the amount of<br>business during the<br>filed, state income f  | f income received by the<br>two years immediately<br>for each spouse separat   | r preceding the commencentely. (Married debtors filing t  | aployment, trade, profession, open<br>ment of this case. Give particular<br>under chapter 12 or chapter 13 n<br>are separated and a joint petitio  | s. If a joint petition is nust state income for  |  |  |
| AMOUNT   | SOURCE   | Ē   | F  | ISCAL YEAR PERIOI  |  |  |
| -100.00  | Busines  | s Loss  | 2  | 008  |  |  |
| -2,080.00  | Busines  | s Loss  | 2  | 009  |  |  |
| 3. Payments to   | creditors  |   |  |  |  |  |
| e a. Individual or joint<br>services, and other<br>the aggregate value<br>(*) any payments th<br>repayment schedule<br>under chapter 12 or | debts to any creditor me of all property that con at were made to a cred e under a plan by an ap   | ade within 90 days immedia<br>stitutes or is affected by sud<br>itor on account of a domest<br>proved nonprofit budgeting<br>le payments by either or bot | yments on loans, installment pur<br>ately preceding the commencem<br>ch transfer is less than \$600. Ind<br>ic support obligation or as part o<br>and credit counseling agency. (No<br>th spouses whether or not a joint                   | ent of this case unlessicate with an asterisk of an alternative Married debtors filing                   |  |  |
| NAME AND ADDRE   | ESS OF   | DATES OF<br>PAYMENTS  | AMOUNT<br>PAID   | AMOUNT<br>STILL OWING  |  |  |
| No unsecured cree than \$600 in the la   |  |   |  |  |  |  |

None **☑**  b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90** days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF TRANSFERS AMOUNT STILL OWING

\*Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

None **☑**  c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT
AND CASE NUMBER
Laura Clements v. Debtor
10120310

NATURE OF PROCEEDING Civil

AND LOCATIO

State of Washington
Spokane County
District Court

COURT OR AGENCY

STATUS OR DISPOSITION Judgment entered. Garnishment commenced. Debtor advised no judgment lien on home.

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS

OF PERSON FOR WHOSE

BENEFIT PROPERTY WAS SEIZED

DESCRIPTION

AND VALUE OF

SEIZURE

PROPERTY

Laura Clements 6104 S. Magnolia Spokane, WA 99223 Garnishment - \$1,472.11

#### 5. Repossessions, foreclosures and returns

None 

✓

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF REPOSSESSION, DESCRIPTION

NAME AND ADDRESS FORECLOSURE SALE, AND VALUE OF

OF CREDITOR OR SELLER TRANSFER OR RETURN PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

TERMS OF
NAME AND ADDRESS
DATE OF
ASSIGNMENT
OF ASSIGNEE
ASSIGNMENT
OR SETTLEMENT

None **☑** 

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS

NAME AND ADDRESS

OF COURT

OF CUSTODIAN

OF COURT

CASE TITLE & NUMBER

ORDER

DESCRIPTION

AND VALUE OF

PROPERTY

### 7. Gifts

None **☑**  List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS RELATIONSHIP DESCRIPTION
OF PERSON TO DEBTOR, DATE AND VALUE OF
OR ORGANIZATION IF ANY OF GIFT GIFT

#### 8. Losses

None **☑**  List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION DESCRIPTION OF CIRCUMSTANCES AND, IF
AND VALUE OF LOSS WAS COVERED IN WHOLE OR IN PART DATE OF
PROPERTY BY INSURANCE, GIVE PARTICULARS LOSS

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

OF PAYEE

Southwell & O'Rourke 960 Paulsen Building 421 W. Riverside Avenue Spokane, WA 99201 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE

OF PROPERTY
See 2016 Disclosure

\$1,839.00 received for pre-petition services, costs, and filing fee. \$190.00 held in trust account.

#### 10. Other transfers

None **☑**  a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED

AND VALUE RECEIVED

None 
☑

b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR INTEREST IN PROPERTY

#### 11. Closed financial accounts

None **☑**  List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None **✓**  List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS NAMES AND ADDRESSES DESCRIPTION DATE OF TRANSFER
OF BANK OR OF THOSE WITH ACCESS OF OR SURRENDER,
OTHER DEPOSITORY TO BOX OR DEPOSITOR CONTENTS IF ANY

#### 13. Setoffs

None **☑**  List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF AMOUNT OF NAME AND ADDRESS OF CREDITOR SETOFF SETOFF

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS

DESCRIPTION AND VALUE

OF OWNER OF PROPERTY LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

Ø

If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16508 N. Brannon Lane Same 8/2006 - 2/2009 Spokane, WA 99208

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor 's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

Laura Clements, Ex-Spouse

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

## None ✓

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

SITE NAME AND NAME AND ADDRESS DATE OF ENVIRONMENTAL ADDRESS OF GOVERNMENTAL UNIT NOTICE LAW

## None ✓

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND NAME AND ADDRESS DATE OF ENVIRONMENTAL ADDRESS OF GOVERNMENTAL UNIT NOTICE LAW

#### None **☑**

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS DOCKET NUMBER STATUS OR OF GOVERNMENTAL UNIT DISPOSITION

| 18. | Nature. | location | and | name   | of | business |
|-----|---------|----------|-----|--------|----|----------|
| ıv. | Hatule. | iocalion | and | Hallic | vı | Dubilies |

|           | 18. Nature, location   | on and name of business  |                            |                               |  |  |  |  |
|-----------|--|--|----------------------------|-------------------------------|--|--|--|--|
| None      | a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within the <b>six years</b> immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the <b>six years</b> immediately preceding the commencement of this case. |  |                            |                               |  |  |  |  |
|           | and beginning and endi   | If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the <b>six years</b> immediately preceding the commencement of this case. |                            |                               |  |  |  |  |
|           | beginning and ending d   | ration, list the names, addresses, taxpayer identiates of all businesses in which the debtor was a the six years immediately preceding the common  | partner or owned 5 percent |                               |  |  |  |  |
|           | NAME   | LAST FOUR DIGITS OF SOCIAL SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN   | NATURE OF<br>BUSINESS      | BEGINNING AND ENDING<br>DATES |  |  |  |  |
|           | Camera System, Sole  |  | Still photography          | 11/07                         |  |  |  |  |
|           | Proprietorship   |  |                            | 9/09                          |  |  |  |  |
| None<br>☑ | b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.  |  |                            |                               |  |  |  |  |
|           | NAME   | ,  | ADDRESS                    |                               |  |  |  |  |
|           | * * * * *  |  |                            |                               |  |  |  |  |

[if completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | 10/21/2010 |           | /s/ Evan J. Clements |
|------|------------|-----------|----------------------|
|      |            | of Debtor | Evan J. Clements     |

### United States Bankruptcy Court Eastern District of Washington

| In re Evan J. Clements |        | Case No. |     |
|------------------------|--------|----------|-----|
|                        | Pebtor | Chapter  | _13 |

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE  | ATTACHED<br>(YES/NO) | NO. OF SHEETS | SHEETS ASSETS |            | LIABILITIES      | OTHER          |
|---|----------------------|---------------|---------------|------------|------------------|----------------|
| A - Real Property   | YES                  | 1             | \$            | 133,200.00 |                  |                |
| B - Personal Property   | YES                  | 2             | \$            | 14,011.43  |                  |                |
| C - Property Claimed<br>as Exempt   | YES                  | 1             |               |            |                  |                |
| D - Creditors Holding<br>Secured Claims   | YES                  | 1             |               |            | \$<br>116,114.31 |                |
| E - Creditors Holding Unsecured<br>Priority Claims<br>(Total of Claims on Schedule E) | YES                  | 2             |               |            | \$<br>0.00       |                |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                                 | YES                  | 2             |               |            | \$<br>68.747.45  |                |
| G - Executory Contracts and<br>Unexpired Leases                                       | YES                  | 1             |               |            |                  |                |
| H - Codebtors   | YES                  | 1             |               |            |                  |                |
| I - Current Income of Individual Debtor(s)  | YES                  | 1             |               |            |                  | \$<br>2,919.61 |
| J - Current Expenditures of Individual Debtor(s)                                      | YES                  | 1             |               |            |                  | \$<br>2,639.46 |
| TOTAL   |                      | 13            | \$            | 147,211.43 | \$<br>184,861.76 |                |

# United States Bankruptcy Court Eastern District of Washington

| In re | Evan J. Clements   | Case No.       | )        |  |  |  |  |
|-------|--|----------------|----------|--|--|--|--|
|       | Debtor   | Chapter        | 13       |  |  |  |  |
|       | STATISTICAL SUMMARY OF CERTAIN LIABILITIE  | OATA (28 U.S.C | . § 159) |  |  |  |  |
|       | If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. |                |          |  |  |  |  |

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

| Type of Liability  | An | nount |
|--|----|-------|
| Domestic Support Obligations (from Schedule E)   | \$ | 0.00  |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)   | \$ | 0.00  |
| Claims for Death or Personal Injury While Debtor Was<br>Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ | 0.00  |
| Student Loan Obligations (from Schedule F)   | \$ | 0.00  |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E.                  | \$ | 0.00  |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                              | \$ | 0.00  |
| TOTAL  | \$ | 0.00  |

#### State the following:

| Average Income (from Schedule I, Line 16)  | \$<br>2,919.61 |
|--|----------------|
| Average Expenses (from Schedule J, Line 18)  | \$<br>2,639.46 |
| Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20) | \$<br>3,535.33 |

#### State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY" column                  |         | \$ 0.00      |
|--|---------|--------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.            | \$ 0.00 |              |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |         | \$ 0.00      |
| 4. Total from Schedule F   |         | \$ 68,747.45 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |         | \$ 68,747.45 |

B6A (Official Form 6A) (12/07)

| ln re: | Evan J. Clements | Case No.      |            |  |
|--------|------------------|---------------|------------|--|
|        | Debtor           | <del></del> , | (If known) |  |

## **SCHEDULE A - REAL PROPERTY**

| DESCRIPTION AND<br>LOCATION OF<br>PROPERTY           | NATURE OF DEBTOR'S<br>INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF<br>SECURED<br>CLAIM |
|--|--|-----------------------------------|--|-------------------------------|
| Debtor's Home<br>6704 N. Monroe<br>Spokane, WA 99208 |  |                                   | \$ 133,200.00  | \$ 116,114.31                 |

Total > \$ 133,200.00

(Report also on Summary of Schedules.)

| In re | Evan J. Clements | Case No. |            |
|-------|------------------|----------|------------|
|       | Debtor           |          | (If known) |

## **SCHEDULE B - PERSONAL PROPERTY**

| 1. Cash on hand 2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.  3. Security deposits with public utilities, telephone companies, landlords, and others. | X X | DESCRIPTION AND LOCATION OF PROPERTY          | HUSBAND, WIFE, JOINT<br>OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|---|-----|---|--------------------------------------|--|
| Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.      Security deposits with public utilities, telephone companies, landlords, and others.                   | X   |   |                                      |  |
| accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.  3. Security deposits with public utilities, telephone companies, landlords, and others.   |     |   |                                      |  |
| telephone companies, landlords, and others.   | X   |   | 1                                    |  |
| . Have about an about 10 100  |     |   |                                      |  |
| Household goods and furnishings, including audio, video, and computer equipment.  |     | Household Goods and Furnishings               |                                      | 2,000.00   |
| Books, pictures and other art objects,<br>antiques, stamp, coin, record, tape,<br>compact disc, and other collections or<br>collectibles.   |     | Misc. Books, Pictures, and Other Collectibles |                                      | 1,500.00   |
| 6. Wearing apparel.   |     | Wearing Apparel                               |                                      | 800.00   |
| 7. Furs and jewelry.  |     | Jewelry                                       |                                      | 300.00   |
| Firearms and sports, photographic, and other hobby equipment.   |     | Misc. Hobby Equipment                         |                                      | 500.00   |
| • • • •   | Х   |   |                                      |  |
| 10. Annuities. Itemize and name each issuer.  | X   |   |                                      |  |
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)   | X   |   |                                      |  |
| Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   |     | 401K  |                                      | 564.32   |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize.   | X   |   |                                      |  |
| 14. Interests in partnerships or joint ventures. Itemize.   | Х   |   |                                      |  |
| 15. Government and corporate bonds and other negotiable and nonnegotiable instruments.  | Х   |   |                                      |  |
| 16. Accounts receivable.  | X   |   |                                      |  |
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.  | X   |   |                                      |  |
| Other liquidated debts owed to debtor including tax refunds. Give particulars.  | X   |   |                                      |  |

| n re | Evan J. Clements | Case No. |            |
|------|------------------|----------|------------|
|      | Debtor           | -1       | (If known) |

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

| TYPE OF PROPERTY  | NONE | DESCRIPTION AND LOCATION<br>OF PROPERTY | HUSBAND, WIFE, JOINT<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST<br>IN PROPERTY, WITH-<br>OUT DEDUCTING ANY<br>SECURED CLAIM<br>OR EXEMPTION |
|---|------|---|--------------------------------------|---|
| 19. Equitable or future interests, life estates,<br>and rights or powers exercisable for the<br>benefit of the debtor other than those<br>listed in Schedule A - Real Property.   | X    |   |                                      |   |
| <ol> <li>Contingent and noncontingent interests<br/>in estate of a decedent, death benefit<br/>plan, life insurance policy, or trust.</li> </ol>  | Х    |   |                                      |   |
| 21. Other contingent and unliquidated<br>claims of every nature, including tax<br>refunds, counterclaims of the debtor,<br>and rights to setoff claims. Give<br>estimated value of each.  | X    |   |                                      |   |
| 22. Patents, copyrights, and other intellectual property. Give particulars.   | X    |   |                                      |   |
| 23. Licenses, franchises, and other general intangibles. Give particulars.  | Х    |   |                                      |   |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X    |   |                                      |   |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories.  |      | 2006 Suzuki Motorcycle                  |                                      | 6,865.00  |
| 26. Boats, motors, and accessories.   | х    |   |                                      |   |
| 27. Aircraft and accessories.   | Х    |   |                                      |   |
| 28. Office equipment, furnishings, and supplies.  | X    |   |                                      |   |
| <ol> <li>Machinery, fixtures, equipment and<br/>supplies used in business.</li> </ol>   | X    |   |                                      |   |
| 30. Inventory.  | Х    |   |                                      |   |
| 31. Animals.  |      | 2 Cats                                  |                                      | 10.00   |
| 32. Crops - growing or harvested. Give particulars.   | Х    |   |                                      |   |
| 33. Farming equipment and implements.   | Χ    |   |                                      |   |
| 34. Farm supplies, chemicals, and feed.   | Х    |   |                                      |   |
| 35. Other personal property of any kind not already listed. Itemize.  |      | Garnished Funds                         |                                      | 1,472.11  |
|   | _    | 1 continuation sheets attached Tot      | al >                                 | \$ 14,011.43  |

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

| In re | Evan J. Clements | Case No. |            |
|-------|------------------|----------|------------|
|       | Debtor           |          | (If known) |

## **SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

| Debtor claims the exemptions to which debtor is entitled under:<br>Check one box) | ☐ Check if debtor claims a homestead exemption that exceeds \$146,450.* |
|---|---|
| 7111 LLS C & 522/b\/2\  |   |

□11 U.S.C. § 522(b)(3) \*FMV = Fair Market Value

| DESCRIPTION OF PROPERTY                              | SPECIFY LAW<br>PROVIDING EACH<br>EXEMPTION | VALUE OF<br>CLAIMED<br>EXEMPTION | CURRENT<br>VALUE OF PROPERTY<br>WITHOUT DEDUCTING<br>EXEMPTION |
|--|--|----------------------------------|--|
| 2 Cats   | 11 USC § 522(d)(5)                         | Full FMV                         | 10.00  |
| 2006 Suzuki Motorcycle                               | 11 USC § 522(d)(5)                         | Full FMV                         | 6,865.00   |
|  | 11 USC § 522(d)(2)                         | Full FMV                         |  |
| 401K   | 11 USC § 522(d)(12)                        | Full FMV                         | 564.32   |
| Debtor's Home<br>6704 N. Monroe<br>Spokane, WA 99208 | 11 USC § 522(d)(1)                         | Full FMV                         | 133,200.00   |
| Garnished Funds                                      | 11 USC § 522(d)(5)                         | Full FMV                         | 1,472.11   |
| Household Goods and Furnishings                      | 11 USC § 522(d)(3)                         | Full FMV                         | 2,000.00   |
| Jewelry  | 11 USC § 522(d)(4)                         | Full FMV                         | 300.00   |
| Misc. Books, Pictures, and Other Collectibles        | 11 USC § 522(d)(3)                         | Full FMV                         | 1,500.00   |
| Misc. Hobby Equipment                                | 11 USC § 522(d)(5)                         | Full FMV                         | 500.00   |
| Wearing Apparel                                      | 11 USC § 522(d)(3)                         | Full FMV                         | 800.00   |

<sup>\*</sup> Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| In re | Evan J. Clements |        | Case No. |            |
|-------|------------------|--------|----------|------------|
|       |                  | Debtor |          | (If known) |

## **SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions, Above.) | CODEBTOR | HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
|---|----------|--------------------------------------|--|------------|--------------|----------|---|---------------------------------|
| ACCOUNT NO.  Joe and Jane Clements 16508 N. Brannon Spokane, WA 99208                                   |          |                                      | Debtor's Home<br>6704 N. Monroe<br>Spokane, WA 99208<br>VALUE \$133,200.00                     |            |              |          | 113,114.31  | 0.00                            |
| ACCOUNT NO.  Southwell & O'Rourke, P.S. 960 Paulsen Building 421 W. Riverside Avenue Spokane, WA 99201  |          |                                      | Debtor's Home<br>6704 N. Monroe<br>Spokane, WA 99208<br>VALUE \$133,200.00                     |            |              |          | 3,000.00  | 0.00                            |

continuation sheets attached

0

Subtotal → (Total of this page)

Total > (Use only on last page)

| \$<br>116,114.31 | \$<br>0.00 |
|------------------|------------|
| \$<br>116,114.31 | \$<br>0.00 |

(Report also on Summary of (If applicable, report Schedules) also on Statistical

also on Statistical
Summary of Certain
Liabilities and
Related Data.)

In re Evan J. Clements

\_\_\_\_\_ Case No.
Debtor

| /If | kı | าก | ۱۸/ | n' |
|-----|----|----|-----|----|
|     |    |    |     |    |

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

| TYF  | PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)   |
|------|--|
|      | Domestic Support Obligations   |
|      | Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or consible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in J.S.C. § 507(a)(1).  |
|      | Extensions of credit in an involuntary case  |
| арр  | Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the ointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).   |
|      | Wages, salaries, and commissions   |
|      | Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying ependent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the sation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
|      | Contributions to employee benefit plans  |
| cess | Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the sation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).  |
|      | Certain farmers and fishermen  |
|      | Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).   |
|      | Deposits by individuals  |
| that | Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, were not delivered or provided. 11 U.S.C. § 507(a)(7).  |
|      | Taxes and Certain Other Debts Owed to Governmental Units   |
|      | Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).  |
|      | Commitments to Maintain the Capital of an Insured Depository Institution   |
|      | Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of vernors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. 07 (a)(9).  |
|      | Claims for Death or Personal Injury While Debtor Was Intoxicated   |
| anot | Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or ther substance. 11 U.S.C. § 507(a)(10).  |
|      | * Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.   |

1 continuation sheets attached

Case No. In re **Evan J. Clements** (If known)

Debtor

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS<br>INCURRED AND<br>CONSIDERATION<br>FOR CLAIM | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF CLAIM | AMOUNT<br>ENTITLED TO<br>PRIORITY | AMOUNT<br>NOT<br>ENTITLED TO<br>PRIORITY, IF<br>ANY |
|---|----------|--------------------------------------|--|------------|--------------|----------|--------------------|-----------------------------------|---|
| ACCOUNT NO.   |          |                                      |  |            |              |          |                    |                                   | \$0.00  |

Sheet no.  $\underline{1}$  of  $\underline{1}$  continuation sheets attached to Schedule of Creditors Holding Priority Claims

Subtotals > (Totals of this page)

Total ➤ (Use only on last page of the completed Schedule E. Report also on the Summary of

Total ➤ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)

Schedules.)

| 0.00 | \$<br>0.00 | \$   | 0.00 |
|------|------------|------|------|
| 0.00 |            |      |      |
|      | \$<br>0.00 | \$   | 0.00 |
|      | 0.00       | 0.00 | 0.00 |

| In re | Evan J. Clements | Case No.   |
|-------|------------------|------------|
|       | Debtor           | (If known) |

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                         | CODEBTOR | HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM |
|---|----------|--------------------------------------|--|------------|--------------|----------|--------------------|
| ACCOUNT NO. 3956  HSBC Retail Services - Suzuki PO Box 60107 City of Industry, CA 91716-0107                              |          |                                      | Charges  |            |              |          | 5,848.39           |
| Joe and Jane Clements 16508 N. Brannon Lane Spokane, WA 99208  Adept Escrow Services, Inc. PO Box 18039 Spokane, WA 99228 |          |                                      | Unsecured Ioan   |            |              |          | 20,515.00          |
| Laura Clements 6104 S. Magnolia Spokane, WA 99223  Michael J. Beyer Attorney at Law 1403 W. Broadway Spokane, WA 99201    |          |                                      | Judgment - Unsecured   |            |              |          | 34,506.43          |
| USAA Credit Card Payments 10750 McDermott FWY San Antonio, TX 78288-0570  |          |                                      | Charges  |            |              |          | 3,526.77           |

1 Continuation sheets attached

Subtotal > \$ 64,396.59

Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)

| In re | Evan J. Clements | Case No.   |  |
|-------|------------------|------------|--|
|       | Debtor           | (If known) |  |

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

|   |          |                                      | (Gontinuation Gridge)  |            |              |          |                    |
|---|----------|--------------------------------------|--|------------|--------------|----------|--------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM |
| ACCOUNT NO. 1193  |          |                                      |  |            |              |          | 4,350.86           |
| USAA Credit Card Payments<br>10750 McDermott FWY<br>San Antonio, TX 78288-0570                    |          |                                      | Charges  |            |              |          |                    |

Sheet no.  $\underline{1}$  of  $\underline{1}$  continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

\$ 4,350.86

Total > \$ 68,747.45

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.) B6G (Official Form 6G) (12/07)

| In re: | Evan J. Clements |        | Case No. |            |
|--------|------------------|--------|----------|------------|
|        |                  | Debtor |          | (If known) |

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

☑ Check this box if debtor has no executory contracts or unexpired leases.

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE,<br>OF OTHER PARTIES TO LEASE OR CONTRACT. | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST, STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
|---|--|
|   |  |

**B6H (Official Form 6H) (12/07)** 

| In re: Evan J. Clements  Debtor              | Case No. (If known)          |
|--|------------------------------|
| SCHEDULE H                                   | - CODEBTORS                  |
| ☑ Check this box if debtor has no codebtors. |                              |
| NAME AND ADDRESS OF CODEBTOR                 | NAME AND ADDRESS OF CREDITOR |

| B6I (Official Form 6I) (12/07) |          |
|--------------------------------|----------|
| In re Evan J. Clements         | Case No. |

## SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

(If known)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor

| Debtor's Marital                             |                    | DEPENDENTS OF DEBTOR AND SPOUSE                       |             |                      |            |   |  |  |
|--|--------------------|---|-------------|----------------------|------------|---|--|--|
| Status: <b>Divorc</b>                        | ed                 |   |             |                      |            |   |  |  |
|  |                    | RELATIONSHIP(S):                                      |             |                      | AGE        | (S):  |  |  |
| Employment:                                  |                    | <u>DEBTOR</u>   |             | SPOUSE               |            |   |  |  |
| Occupation                                   | Creat              | tive Services Director                                |             |                      |            |   |  |  |
| Name of Employer                             | KHQ                | TV  |             |                      |            |   |  |  |
| How long employed                            | 3 yea              | rs  |             |                      |            |   |  |  |
| Address of Employer                          |                    | W. Riverside Ave<br>ane, WA 99201                     |             |                      |            |   |  |  |
| INCOME: (Estimate o case f                   |                    | projected monthly income at time                      |             | DEBTOR               |            | SPOUSE  |  |  |
| 1. Monthly gross wage                        |                    | d commissions   | \$          | 3,718.78             | \$_        |   |  |  |
| (Prorate if not pa<br>2. Estimate monthly or |                    |   | \$          | 0.00                 | \$         |   |  |  |
| 3. SUBTOTAL                                  |                    |   | \$          | 3,718.78             | \$         |   |  |  |
| 4. LESS PAYROLL D                            | EDUCTION           | S   | Ψ           | 5,7 10.70            | Ψ_         |   |  |  |
| a. Payroll taxes a                           | and social se      | curity  | \$          | 613.06               | \$_        |   |  |  |
| b. Insurance                                 |                    |   | \$          | 143.89               | \$_        |   |  |  |
| c. Union dues                                |                    |   | \$          | 0.00                 | \$_        |   |  |  |
| d. Other (Specify                            | <sup>/)</sup> Parl | king  | \$          | 42.22                | \$_        |   |  |  |
| 5. SUBTOTAL OF PA                            | AYROLL DE          | DUCTIONS  | \$          | 799.17               | \$_        |   |  |  |
| 6. TOTAL NET MONT                            | THLY TAKE          | HOME PAY  | \$          | 2,919.61             | \$_        |   |  |  |
| 7. Regular income from (Attach detailed s    | •                  | of business or profession or farm                     | \$          | 0.00                 | \$         |   |  |  |
| 8. Income from real pr                       | ,                  |   | \$ <u></u>  | 0.00                 | Ψ_         |   |  |  |
| Interest and dividen                         |                    |   | \$ <u></u>  | 0.00                 | Ψ <u></u>  |   |  |  |
| 10. Alimony, maintena                        | nce or suppo       | ort payments payable to the debtor for the            | \$<br>\$    | 0.00                 | \$ _<br>\$ |   |  |  |
| 11. Social security or o                     |                    | lents listed above.<br>nent assistance                | Φ           | 0.00                 | Φ_         |   |  |  |
| (Specify)                                    |                    |   | \$          | 0.00                 | \$_        |   |  |  |
| 12. Pension or retirem                       | ent income         |   | \$          | 0.00                 | \$_        |   |  |  |
| 13. Other monthly inco                       | ome                |   |             |                      |            |   |  |  |
| (Specify)                                    |                    |   | \$          | 0.00                 | \$ _       |   |  |  |
| 14. SUBTOTAL OF L                            | INES 7 THR         | OUGH 13   | \$          | 0.00                 | \$         |   |  |  |
| 15. AVERAGE MONT                             | THLY INCOM         | ME (Add amounts shown on lines 6 and 14)              | \$          | 2,919.61             | \$         |   |  |  |
| 16. COMBINED AVE                             | RAGE MON           | THLY INCOME: (Combine column                          | \$ 2,919.61 |                      |            |   |  |  |
| ,  | ease or decre      | ease in income reasonably anticipated to occur within | Statistical | Summary of Certain L | iabiliti   | s and, if applicable, on<br>es and Related Data)<br>: |  |  |

| <sup>In re</sup> Evan J. Clements |        | Case No.   |
|-----------------------------------|--------|------------|
|                                   | Debtor | (If known) |

## SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate

| any payments made biweekly, quarterly, semi-a<br>differ from the deductions from income allowed                     |              |               | show mont      | nly rate. The average mo   | nthly expenses calculated on t    | his form may  |
|---|--------------|---------------|----------------|----------------------------|-----------------------------------|---------------|
| Check this box if a joint petition is filed a expenditures labeled "Spouse."  | and debtor'  | s spouse m    | aintains a s   | eparate household. Com     | plete a separate schedule of      |               |
| 1. Rent or home mortgage payment (include le  | ot rented fo | r mobile ho   | me)            |                            | \$                                | 842.96        |
| a. Are real estate taxes included?  | Yes          | ✓             | No             |                            |                                   |               |
| b. Is property insurance included?  | Yes          |               | No             | ✓                          |                                   |               |
| 2. Utilities: a. Electricity and heating fuel   | _            |               | · <del>-</del> |                            | \$                                | 167.00        |
| b. Water and sewer  |              |               |                |                            | \$                                | 87.00         |
| c. Telephone  |              |               |                |                            | \$                                | 81.00         |
| d. Other Garbage  |              |               |                |                            | \$                                | 20.00         |
| 3. Home maintenance (repairs and upkeep)  |              |               |                |                            |                                   | 67.00         |
| 4. Food   |              |               |                |                            | \$                                | 470.00        |
| 5. Clothing   |              |               |                |                            | \$                                | 50.00         |
| 6. Laundry and dry cleaning   |              |               |                |                            | \$                                | 25.00         |
| 7. Medical and dental expenses  |              |               |                |                            | \$                                | 50.00         |
| 8. Transportation (not including car payments   | )            |               |                |                            | \$                                | 369.00        |
| 9. Recreation, clubs and entertainment, news  | papers, ma   | igazines, et  | c.             |                            | \$                                | 85.00         |
| 10. Charitable contributions  |              |               |                |                            | \$                                | 0.00          |
| 11. Insurance (not deducted from wages or in  | cluded in h  | ome mortga    | age paymen     | ts)                        |                                   |               |
| a. Homeowner's or renter's  |              |               |                |                            | \$                                | See Auto      |
| b. Life   |              |               |                |                            | \$                                | 0.00          |
| c. Health   |              |               |                |                            | \$                                | 0.00          |
| d. Auto   |              |               |                |                            | \$                                | 135.00        |
| e. Other  |              |               |                |                            | \$                                | 0.00          |
| 12. Taxes (not deducted from wages or include   | ded in home  | e mortgage    | payments)      |                            |                                   | _             |
| (Specify)   |              | 3.3.          | , , , , , ,    |                            | \$                                | 0.00          |
| 13. Installment payments: (In chapter 11, 12,   | and 13 cas   | es. do not    | list payment   | s to be included in the pl |                                   | 0.00          |
| a. Auto   |              | ,             |                |                            | \$                                | 0.00          |
| b. Other  |              |               |                |                            | \$                                | 0.00          |
| 14. Alimony, maintenance, and support paid t  | o others     |               |                |                            | *                                 |               |
| <ol> <li>Aimony, maintenance, and support paid to</li> <li>Payments for support of additional dependence</li> </ol> |              | ing at vour   | home           |                            | \$<br>*                           | 0.00          |
| Regular expenses from operation of busin  |              |               |                | etailed statement)         | \$<br>                            | 0.00          |
| · ·   | iess, proies | ssion, or rai | iii (allacii u | etalled statement)         |                                   | 0.00          |
| 17. Other <u>License tabs</u> Misc. personal expenses, to   | ilottrios    | 2 haire       | ıtc            |                            | \$<br>\$                          | 8.83<br>85.00 |
| Pet food, supplies & vet ser  |              | & Hall Cu     | 115            |                            |                                   | 55.00         |
| Tax return preparation fee  | VICES        |               |                |                            |                                   | 25.00         |
| Union Dues  |              |               |                |                            |                                   | 16.67         |
|   |              |               |                |                            |                                   |               |
| 18. AVERAGE MONTHLY EXPENSES (Tot if applicable, on the Statistical Summary of C                                    |              |               |                |                            | \$                                | 2,639.46      |
| 19. Describe any increase or decrease in exp  | enditures r  | easonably a   | anticipated t  | o occur within the year fo | ollowing the filing of this docum | ent:          |
| 20. STATEMENT OF MONTHLY NET INCO   |              |               |                |                            |                                   | _             |
| a. Average monthly income from Line   |              |               |                |                            | \$                                | 2,919.61      |
| b. Average monthly expenses from L  | ine 18 abov  | ⁄e            |                |                            | \$                                | 2,639.46      |
| c. Monthly net income (a. minus b.)   |              |               |                |                            | \$                                | 280.15        |

| In re | Evan J. Clements |        | . Case No. |            |
|-------|------------------|--------|------------|------------|
|       |                  | Debtor | -          | (If known) |

### **DECLARATION CONCERNING DEBTOR'S SCHEDULES**

#### **DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

|       | declare under penalty of perjury that I have read the foregoing summa<br>and that they are true and correct to the best of my knowledge, infor | •              |                            | 15     |
|-------|--|----------------|----------------------------|--------|
| Date: | 10/21/2010   | Signature:     | /s/ Evan J. Clements       |        |
|       |  | -              | Evan J. Clements           |        |
|       |  |                |                            | Debtor |
|       |  | [If joint case | e, both spouses must sign] |        |

#### DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

(NOT APPLICABLE)

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C §§ 152 and 3571.